CITY OF FORT SMITH, ARKANSAS REQUEST FOR ABANDONMENT OF PUBLIC UTILITY EASEMENT

APPLICATION:	
Indicate one contact person for application:	ApplicantRepresentative
Applicant (owner)	Representative (engineer, attorney, realtor, etc
Name:	Name:
Address:	Address:
Telephone Number:	Telephone Number:
E-Mail:	E-Mail:
Site Address/Location:	
Legal Description of easement(s) to be vacated:	
Reason for Request:	
Current Status of Easement(s):	
APPLICANT/REPRESENTATIVE: I certify	under penalty of perjury that the foregoing aformation, and evidence herewith submitted are belief, true and correct. I understand that bunds for invalidation of application
Signature:	Date:

Property Owner(s)/**Authorized Agent:** *I/we certify under penalty of perjury that I am/we are the owner(s) of the property that is subject of this application and that I/we have read this application and consent to its filing.* **Note: If application is signed by authorized agent, all owners must sign and submit "Authorization of Agent" form.**

Metes and Bounds legal description of easement(s) to be vacated (Provide hard copy and CD containing legal description in MS Word)
Hard copy and PDF of survey showing easement(s) proposed for abandonment
Application Fee of \$150.00. This fee is non-refundable.

Application Checklist:

AUTHORIZATION OF AGENT

If an agent is acting on behalf of the owner(s), all owners must sign in the space provided. This form is necessary only when the person representing this request does not own all the property.

We the undersigned, being owners of real property, authorize		
to act as our agent.	(Print Name of Agent)	
(Type or clearly print)		
NAME & ADDRESS OF ALL OWNERS.	SIGNATURE OF ALL OWNERS.	
1		
2		
3		
4		